Attorney Docket No. 5887-313U1 Express Mail Label No.: EV343987292US

DECLARATION AND POWER OF ATTORNEY

(Original Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

TOUCHSCREEN AMUSEMENT DEVICE

| No | of which is attached l | nereto and/or was filed on | as Application |
|-------------------------------------|---|---|---------------------------------|
| | | wed and understand the contents amended by any amendment refe | |
| | | lose information which is material Regulations, Section 1.56. | al to patentability in |
| 119(a)-(d), of ar also identified b | ny foreign application(below any foreign appl | benefits under Title 35, United S s) for patent or inventor's certific ication for patent or inventor's cer which priority is claimed: | ate listed below and have |
| | FOREIGN | PRIORITY APPLICATION(S |) |
| None | | | Priority Claimed [] Yes [] No |
| (Number) | (Country) | (Day/month/year filed) | |

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I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed:

PROVISIONAL PRIORITY PATENT APPLICATION(S)

| | , | Priority Claimed |
|---|---|---|
| 60/486,237 | July 7, 2003 | [X] Yes [] No |
| (Application No.) | (Filing Date) | |
| | | |
| (Application No.) | (Filing Date) | [] Yes [] No |
| | | |
| STRAUSS HAUER & F power of substitution and | point the registered attorneys and agents a FELD LLP , Customer No. 000570 , as more revocation, to prosecute this application of Coffice connected therewith. | ny attorneys or agents with full |
| STRAUSS HAUER & F | pondence to Customer No. 000570, nan FELD LLP, One Commerce Square, 200 ia 19103-7013. Please direct all commun 965-1293. | 5 Market Street, Suite 2200, |
| all statements made on in statements were made with punishable by fine or imp | nat all statements made herein of my own formation and belief are believed to be to the the knowledge that willful false statements or both, under Section 1001 of false statements may jeopardize the value. | rue; and further that these nents and the like so made are of Title 18 of the United States |
| Full name of first or | | |
| sole inventor | Jeffrey S. Collins | |
| Inventor's Signature | Jeffrey & Collin | |
| Date | 009-10-03 | |
| Residence | Chalfont, Pennsylvania | |
| Citizenship | United States of America | |
| Post Office Address | 132 Billingsly Drive, Chalfont, PA | 18914 |

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